

Date June 25, 1971
Purchase Order No.

Lehrer Sanitary Service

1604 Crooks Ave.

KAUKAUNA, WIS. 54130

Phone 766-2758

RECEIVED DNR

JUL 9 1971

Lake Mich. Dist.

Dear Sir:

As to Item 9 -- We are also accepting flammable liquids in a very limited amount. This material comes from the Paper Mills in the Valley, such as inks, oils, grease and glue. This material is placed very carefully in our landfill so as not to create any run-off or leaching. Other paper waste is used to soak up this material and then landfilled as to your specifications.

Concerning Item 10 -- The rodents are very few in number and poison is set out to compensate this.

Regarding Item 11 -- We have a procedure we follow every day as to landfill and our standards are up to the D.N.R.'s specifications.

Thank you.

Very truly yours,

LEHRER SANITARY SERVICE

James Lehrer
James M. Lehrer

00578

CARD 1

NAME OF OPERATION: LEHNER SANITARY SERVICE LICENSE NUMBER 0073

LOCATION 3 45 T 21N 18E 25

Dist. 36 County 37-38 C. V. 39 Township 40 42 Range 43 45 Section 46 47 48-49 50-51

CARD 2

ADDRESS: BUCHANAN

6 (Street) 26 (Required if location is not complete) 27 (Post Office) 43

NAME OF OPERATOR: LEHNER SANITARY SERVICE

TYPE OF OPERATOR: Municipal 69 (Population 70 75) Private Y (Bond Amount 005000) Exp. Date 76 79 State 69

CARD 3

RESPONSIBLE PERSON TO CONTACT: Name: JAMES LEHNER Title: OWNER

Address: 1004 CROOKSAVE, KAUHAUNA Phone: 766-2758

37 (Street) 56 57 (Post Office) 5430 73 74 80

CARD 4

NAME OF PROPERTY OWNER: JAMES LEHNER TOT. ACRE. OF OPER. 240.0

TYPE OF ZONING: Conservancy 1 Agriculture 4 LOCAL PERMIT REQUIRED: NO YES Y

Residential 2 Industrial 5 Expiration Date 37 Day Mo. Year 42

Unzoned 3 Other 6 (Only if it exists)

DOES SITE OPERATOR HOLD C & T PERMIT: NO X YES 43 If yes, No. 44

WASTES ALLOWABLE AT SITE: Noncomb. 48 Wood Matter 49 Trash 50 Garbage 51 Toxic & Hazardous 52

DOES THIS SITE VIOLATE NR 51.09? NO 53 YES 54 If yes, which Nos. 59

TYPE OF LANDFILL OPERATIONAL REQUIRED: Sanitary 60 Noncombust. 60 Modified 60 Open Dump 60 Other 60

HOW FREQUENTLY MUST COMPACTING AND COVERING BE CONDUCTED: Daily 61 Weekly 61 Monthly 61 Semi Annually 61 Upon Completion 61

IS ON-SITE EQUIPMENT AVAILABLE? NO YES 62 # Dozers 63 # Front Endloaders 65

Compactors 64 # Draglines 66

IS THE SITE ALWAYS OPEN? YES 67 NO 67 IF NO, WHEN IS IT OPEN? 67

Days Open (St. Time, Fin. Time) Basis

M	T	W	Th	F	S	S
630-3245					630-1130	
W,B,M	W,B,M	W,B,M	W,B,M	W,B,M	W,B,M	

TOTAL HOURS PER MONTH OPEN 68 70

GENERAL CHARACTER OF SITE: Quarry 71 Level Area 72 Hillside 73 Marsh 74 Gravel Pit 75

CARD 5

SHORTEST DISTANCE FROM SITE BOUNDARY TO NEAREST RESIDENCE: 00100' FT.

SHORTEST DISTANCE FROM SITE BOUNDARY TO NEAREST SURFACE WATER: 0500' FT.

SHORTEST DISTANCE FROM SITE BOUNDARY TO NEAREST MUNICIPAL WELL: ? FT.

SHORTEST DISTANCE FROM SITE BOUNDARY TO NEAREST FEDERALLY FUNDED ROAD: 1500' FT.

TYPE OF ROAD: Interstate 26 Federal 26 State 26 County 26

AVG. WIDTH ACTIVE FILL AREA: 200' FT. AVG. LENGTH ACTIVE FILL AREA: 50 FT.

WILL SITE CAPACITY BE EXCEEDED DURING NEXT LICENSING PERIOD? NO 76 YES 76

00574

CARD 6

NAMES OF MUNICIPALITIES USING SITE: (List Operator First)

1. Kaukauna

2. Buchanan

3. Harrison

4. Kimberly

5. Combined Lakes

MAXIMUM POP. USING SITE

25	26	31
51	52	57

TOTAL NUMBER OF MUNICIPALITIES USING SITE: 5

TOTAL POPULATION USING SITE: 25,000

COMMENTS:

CARD 7

Punch "3" if both YES

	NR 51.10	NO		YES		Impro. Req. 1		Impro. made with- in 60 days 2	
		NO	YES	NO	YES	NO	YES		
Is License Number Posted?	(o)	<input checked="" type="checkbox"/>	6	<input checked="" type="checkbox"/>	7	<input checked="" type="checkbox"/>	7	<input checked="" type="checkbox"/>	7
Is an Adequate, Easily Read Sign Posted?	(o)	<input checked="" type="checkbox"/>	8	<input checked="" type="checkbox"/>	9	<input checked="" type="checkbox"/>	9	<input checked="" type="checkbox"/>	9
Is Site Screened from Surrounding Roads, Residences, etc.?	(p)	<input checked="" type="checkbox"/>	10	<input checked="" type="checkbox"/>	11	<input checked="" type="checkbox"/>	11	<input checked="" type="checkbox"/>	11
Is a Lockable Gate Provided at Site Entrance?	(n)	<input checked="" type="checkbox"/>	12	<input checked="" type="checkbox"/>	13	<input checked="" type="checkbox"/>	13	<input checked="" type="checkbox"/>	13
Is Site Fenced? (Describe any fencing, Entire — 1 Partial — 2) 14	(h)	<input checked="" type="checkbox"/>	14	<input checked="" type="checkbox"/>	16	<input checked="" type="checkbox"/>	16	<input checked="" type="checkbox"/>	16
Is an Attendant on Duty Whenever Site is Open?	(m)	<input checked="" type="checkbox"/>	15	<input checked="" type="checkbox"/>	18	<input checked="" type="checkbox"/>	18	<input checked="" type="checkbox"/>	18
Is a Rodent and Insect Control Program Enforced?	(i)	<input checked="" type="checkbox"/>	19	<input checked="" type="checkbox"/>	20	<input checked="" type="checkbox"/>	20	<input checked="" type="checkbox"/>	20
Are Means in Existence for Confining Windblown Material to Active Area?	(c)	<input checked="" type="checkbox"/>	21	<input checked="" type="checkbox"/>	22	<input checked="" type="checkbox"/>	22	<input checked="" type="checkbox"/>	22
Are Dikes and/or Ditches in Existence for Protecting Surface and Subsurface Water?	(b)	<input checked="" type="checkbox"/>	23	<input checked="" type="checkbox"/>	24	<input checked="" type="checkbox"/>	24	<input checked="" type="checkbox"/>	24
Are All-Weather Roads Provided?	(j)	<input checked="" type="checkbox"/>	25	<input checked="" type="checkbox"/>	26	<input checked="" type="checkbox"/>	26	<input checked="" type="checkbox"/>	26
Is Open Burning Discontinued, Except for Diseased Elm?	(k)	<input checked="" type="checkbox"/>	27	<input checked="" type="checkbox"/>	28	<input checked="" type="checkbox"/>	28	<input checked="" type="checkbox"/>	28
Are Firebreaks Provided and Maintained?	(l)	<input checked="" type="checkbox"/>	29	<input checked="" type="checkbox"/>	30	<input checked="" type="checkbox"/>	30	<input checked="" type="checkbox"/>	30
Is a Separate Area Maintained for Burning Diseased Elm?	(l)	<input checked="" type="checkbox"/>	31	<input checked="" type="checkbox"/>	32	<input checked="" type="checkbox"/>	32	<input checked="" type="checkbox"/>	32
Is Equipment Provided for Controlling Fire?	(l)	<input checked="" type="checkbox"/>	33	<input checked="" type="checkbox"/>	34	<input checked="" type="checkbox"/>	34	<input checked="" type="checkbox"/>	34
Is Active Area Confined to Smallest Practical Area?	(c)	<input checked="" type="checkbox"/>	35	<input checked="" type="checkbox"/>	36	<input checked="" type="checkbox"/>	36	<input checked="" type="checkbox"/>	36
Is Compacting and Covering Conducted at Frequency Prescribed by Department of Natural Resources?	(e)	<input checked="" type="checkbox"/>	37	<input checked="" type="checkbox"/>	38	<input checked="" type="checkbox"/>	38	<input checked="" type="checkbox"/>	38
Is Adequate Cover Material Available at Site?	(e)	<input checked="" type="checkbox"/>	39	<input checked="" type="checkbox"/>	40	<input checked="" type="checkbox"/>	40	<input checked="" type="checkbox"/>	40
Is Cover Material Stockpiled and Protected for Winter Use?	(e)	<input checked="" type="checkbox"/>	41	<input checked="" type="checkbox"/>	42	<input checked="" type="checkbox"/>	42	<input checked="" type="checkbox"/>	42
Is a Separate Area Maintained for Disposal of Toxic and Hazardous Waste?	(g)	<input checked="" type="checkbox"/>	43	<input checked="" type="checkbox"/>	44	<input checked="" type="checkbox"/>	44	<input checked="" type="checkbox"/>	44

CONCLUSIONS:

The operator of this site must be immediately notified that all items in the above list noted as requiring improvement shall be corrected and in conformance with the Standards within a specified period not exceeding 60 days. Completion of required site improvements must be verified before licensing information is forwarded to the central office. If site improvements are not completed within the specified time limit, the situation must be recommended for appropriate legal action.

EVALUATION ON 17 8 71 BY DCU

DATE OF RELICENSING 71 Day Month Year 76

RECOMMENDED ACTION: LICENSE ☒ , DENIED ☐ , REFER TO LEGAL ☐

00573

Signature of District Director _____ Date _____